



UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE
 United States Patent and Trademark Office
 Address: COMMISSIONER FOR PATENTS
 P.O. Box 1450
 Alexandria, Virginia 22313-1450
 www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 5351

| | | | | |
|-----------------------------|---------------------------------------|--------------|------------------------|-------------------------------------------|
| SERIAL NUMBER 10/767,536 | FILING DATE 01/29/2004 RULE | CLASS 351 | GROUP ART UNIT 2873 | ATTORNEY DOCKET NO. ELTE 02894 PTUS |
|-----------------------------|---------------------------------------|--------------|------------------------|-------------------------------------------|

APPLICANTS

James Hamaker, Plano, TX;

 Greg Smith, Plano, TX;
 Chris Madden, Frisco, TX;

 ** CONTINUING DATA ** *Yes* *hm*

This appln claims benefit of 60/520,886 11/18/2003

 ** FOREIGN APPLICATIONS ** *None* *hm*

 IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **
 ** 01/03/2005

| | | | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------|------------------------|----------------------|----------------------------|
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no | STATE OR COUNTRY TX | SHEETS DRAWING 4 | TOTAL CLAIMS 7 | INDEPENDENT CLAIMS 1 |
| 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after allowance | | | | |
| Verified and Acknowledged | Examiner's Signature <i>Hamaker</i> | Initials <i>hm</i> | | |

ADDRESS

 32233
 STORM L.L.P.
 BANK OF AMERICA PLAZA
 901 MAIN STREET, SUITE 7100
 DALLAS , TX
 75202

TITLE

Auxiliary eyewear display mount

| | | |
|-----------------------------------|-------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| FILING FEE RECEIVED 450 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ |
|-----------------------------------|-------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|